Application Data Sheet

Application Information

Application number:: TBA

Filing Date:: December 19, 2005

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::
CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?:: YES

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: IMMUNOGENIC COMPOSITIONS FOR

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CHLAMYDIA TRACHOMATIS

Attorney Docket Number:: 002441.00183

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure::

Total Drawing Sheets:: 11

Small Entity?:: NO

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: IT

Status:: Full Capacity

Given Name:: Guido

Middle Name::

Family Name:: GRANDI

City of Residence:: Emeryville

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: Chiron Corporation, P.O.Box 8097

City of mailing address:: Emmeryville

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing

94662-8097

address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: IT

Status:: Full Capacity

Given Name:: Oretta

Middle Name::

Family Name:: FINCO

Name Suffix::

City of Residence:: Emmeryville

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: Chiron Corporation, P.O.Box 8097

City of mailing address:: Emmeryville

State or Province of mailing address: CA

Country of mailing address:: US

Postal or Zip Code of mailing 94662-8097

address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: IT

Status:: Full Capacity

Given Name:: Giulio

Middle Name::

Family Name:: RATTI

Name Suffix::

City of Residence:: Emmeryville

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: Chiron Corporation, P.O.Box 8097

CA

City of mailing address:: Emmeryville

State or Province of mailing

address::

Country of mailing address:: US

Postal or Zip Code of mailing 94662-8097

address:

Applicant Authority Type:: Inventor

Primary Citizenship Country:: IT

Status:: Full Capacity

Given Name:: Alessandro

Middle Name::

Family Name:: BONCI

Name Suffix::

City of Residence:: Emmeryville

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: Chiron Corporation, P.O.Box 8097

City of mailing address:: Emmeryville

State or Province of mailing CA

address::

Country of mailing address:: US

Postal or Zip Code of mailing 94662-8097

address:

Correspondence Information

Correspondence Customer Number:: 27476

Representative Information

Representative Customer Number:: 27476

Domestic Priority Information

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This Application	National Stage of	PCT/US2004/020491	25 June 2004
PCT/IB2004/020491	Non-provisional of	60/497,649	25 August 2003
PCT/IB2004/020491	Non-provisional of	60/576,375	01 June 2004

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Great Britain	0315020.8	26 June 2003	Yes
Great Britain	0402236.4	02 February 2004	Yes



Assignee name:: CHIRON CORPORATION

Street of mailing address:: 4560 Horton Street

City of mailing address:: Emmeryville

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing 94662-8097

address::